SCHEDULE B (FEC Form 3X)

SCILDOLL B (I LOI OIII 3X)	Use seperate schedule(s) for each category of the Detailed Summary Page	(check only	NUMBER:	PAGE	PAGE 31 / 49		
TEMIZED DISBURSEMENTS		21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Statemor for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)	and address of any political co	illillillee to so	iicit contribu	tions from s	SUCTI COTTI	iiillee	
AMERICAN RESORT DEVELOPMENT AS	SOCIATION RESORT OW	VNERS CO	ALITION F	PAC (ARD	A-ROC	PA-	
Full Name (Last, First, Middle Initial)				ion ID: 75		564845	55619
Northup for Congress				Disbursement 2 8		Y.,	Υ
Mailing Address 608 Montgomery Avenue			0 9	28	2	0 0 4	
	State Zip Code KY 42701		Amount	of Each Dis	bursemen	t this Pe	eriod
Purpose of Disbursement Contribution	Г	044	L		2	2000.00	0
Contribution 011 Candidate Name Category/							
Anne Northup		Туре					
Office Sought: X House Disburser Senate	nent For: 2004 Primary X General						
President	Other (specify)						
State: KY District: 03							
Full Name (Last, First, Middle Initial) Porter for Congress				t ion ID: 756 Disburseme		717799	96635
			0 9 M	/ D 2 8		0 0 4	Y
Mailing Address 7840 Red Leaf Drive			0 3	20		004	
,	State Zip Code NV 89131		Amount	of Each Dis	bursemen	t this Pe	eriod
Purpose of Disbursement					2	2000.00	0
Contribution Candidate Name		011 Category/					
Jon Porter		Type					
Office Sought: X House Disburser Senate	nent For: 2004 Primary X General						
President	Other (specify)						
State: NV District: 03							
Full Name (Last, First, Middle Initial) Rely on Your Beliefs Fund			t ion ID: 194 Disburseme		171290)8744	
Mailing Address 209 Pennsylvania Avenue Southeast			0 9	[/] ^D 2 8	/ Y Y 2	0 0 4	Y
	State Zip Code DC 20003		Amount	of Each Dis	bursemen	t this Pe	eriod
Purpose of Disbursement Contribution		L		5	5000.00	0	
Contribution 011 Candidate Name Category/							
		Type					
Office Sought: House Disburser Senate	nent For: 2004 Primary General						
President X	Other (specify)						
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SUBTOTAL of Disbursements This Page (optional)		>			9	000.00	0
TOTAL This Period (last page this line number only)		•					